

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <u>The Platte Enterprise</u>		2. DATE <u>9-26-11</u>
3. FREQUENCY OF ISSUE <u>week</u>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <u>52</u>	3B. ANNUAL SUBSCRIPTION PRICE \$ <u>33.38</u> ^{#42}
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <u>Po Box 546, Platte, SD 57369-0546</u>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <u>Po Box 546, Platte, SD 57369-0546</u>		
6. FULL NAME OF PUBLISHER <u>Sharon Huizenga</u>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">FULL NAME <u>Sharon Norman Huizenga</u></div> <div style="width: 45%;">COMPLETE MAILING ADDRESS <u>Po Box 546, Platte, SD 57369</u></div> </div>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <u>Raepha Patricia Nachtigal, 36144 Platte, SD 57369</u>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	<u>1,925</u>	<u>1,925</u>
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and counter sales.	<u>200</u>	<u>200</u>
2. Mail Subscription (Paid and or requested)	<u>1,651</u>	<u>1,647</u>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<u>1,851</u>	<u>1,847</u>
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	<u>26</u>	<u>26</u>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<u>0</u>	<u>0</u>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	<u>1,877</u>	<u>1,873</u>
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	<u>48</u>	<u>52</u>
2. Return from News Agents	<u>1,925</u>	<u>1,925</u>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<u>97.5065%</u>	<u>97.2987%</u>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Sharon Huizenga
(Signature)

Owner/Publisher
(Title)

State of South Dakota)
County of Charles Mix)

(Seal)

Sworn to before me this 26th day of Sept, 20 11
[Signature]
Notary Public

My commission expires: 8-12-2017